# Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 1 of 68

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify You	ırself	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name the your government picture identification example, your drilicense or passport Bring your picture identification to you meeting with the	First name on (for ver's ort).  Nicole Middle name  Kizzie	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names used in the last Include your man maiden names.	8 years	
3.	Only the last 4 d your Social Seci number or feder Individual Taxpa Identification nu (ITIN)	urity al xxx-xx-6382 nyer	

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Page 2 of 68 Document Case number (if known)

Debtor 1 Candace Nicole Kizzie

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.	
	Include trade names and doing business as names	Business name(s)	Business name(s)	
		EINs	EINs	
5.	Where you live	4740 Erin Crescent Street	If Debtor 2 lives at a different address:	
		Henrico, VA 23231 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code	
		Richmond City		
		County	County	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code	
6.	Why you are choosing this district to file for	Check one:	Check one:	
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	

Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 3 of 68 Case 16-33064-KLP

Debtor 1 Candace Nicole Kizzie

Case number (if known)

	The shouter of the					
7.	The chapter of the Bankruptcy Code you are choosing to file under				of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.
	choosing to file under	□с	hapter 7			
		□с	hapter 11			
		□с	hapter 12			
		<b>■</b> C	hapter 13			
8.	How you will pay the fee		about how yo	u may pay. Typi attorney is subm	cally, if you are paying the fee yo	k with the clerk's office in your local court for more details surself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with
					<b>allments.</b> If you choose this option (Official Form 103A).	on, sign and attach the Application for Individuals to Pay
			but is not req applies to you	uired to, waive your family size and	our fee, and may do so only if yo d you are unable to pay the fee ir	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.
	Have you filed for	- <u>-</u>				
9.	Have you filed for bankruptcy within the last 8 years?	■ No				
			District		When	Case number
			District		When	Case number
			District		When	Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with	■ No				
	you, or by a business partner, or by an affiliate?					
			Debtor	-		Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your residence?	■ No	Go to I	ne 12.		
		□Ye	es. Has yo	ur landlord obtai	ned an eviction judgment agains	t you and do you want to stay in your residence?
				No. Go to line 1	2.	
				Yes. Fill out <i>Init</i> bankruptcy petit		Judgment Against You (Form 101A) and file it with this

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 4 of 68

Debtor 1 Candace Nicole Kizzie Case number (if known)

ar	Report About Any Bu	sinesses `	You Own	as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a		Numbe	er, Street, City, State	e & ZIP Code
	separate sheet and attach it to this petition.		Check	the appropriate box	to describe your business:
	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))		ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?				
	For a definition of small	No.	I am n	ot filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter 1	1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have Anv	Hazardo	us Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any				
•	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is t	he hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 5 of 68

Debtor 1 Candace Nicole Kizzie

Case number (if known)

Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit
counseling agency within the 180 days before I filed
this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Candace Nicole Kizzie

Document Page 6 of 68

Case number (if known)

Part	6: Answer These Questi	ons for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consultindividual primarily for a personal,		d in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			<ul> <li>No. Go to line 16c.</li> <li>☐ Yes. Go to line 17.</li> <li>State the type of debts you owe that are not consumer debts or business debts</li> </ul>				
		16c.					
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	o to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		□ No				
			☐ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	<b>\$</b> 100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	<b>\$</b> 100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Part	:7: Sign Below						
For	you	I have ex	amined this petition, and I declare	under penalty of perjury that the informat	tion provided is true and correct.		
				n aware that I may proceed, if eligible, ur available under each chapter, and I choo			
			o attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this sument, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request	relief in accordance with the chapte	er of title 11, United States Code, specifi	ed in this petition.		
		bankrupt and 3571	cy case can result in fines up to \$25 I.	cealing property, or obtaining money or p 50,000, or imprisonment for up to 20 yea	property by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Candac	dace Nicole Kizzie e Nicole Kizzie e of Debtor 1	Signature of Debtor 2			
		Executed	June 20, 2016 MM / DD / YYYY	Executed on MM / I	DD / YYYY		

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 7 of 68

Debtor 1 Candace Nicole Kizzie

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Patrick	Thomas Keith VSB	Date	June 20, 2016	
Signature of	Attorney for Debtor		MM / DD / YYYY	
	omas Keith VSB			
Printed name				
Boleman I	Law Firm, P.C.			
Firm name				
P.O. Box 1	11588			
Richmond	I, VA 23230			
Number, Street,	City, State & ZIP Code			
Contact phone	(804) 358-9900	Email address	info@bolemanlaw.com	
48446				
Bar number & S	tate		<del></del>	

Debtor 1	Candace Nicole R			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	PF VIRGINIA	
Case number				
(if known)				Check if this is an amended filing

# Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)		·
	1a. Copy line 55, Total real estate, from Schedule A/B	\$	177,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	13,615.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	190,615.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	182,017.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	27,501.00
	Your total liabilities	\$	209,518.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,831.02
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,791.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
	■ Yes		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Candace Nicole Kizzie

Page 9 of 68 Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

6,229.01

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	Case	10-33004-1	CLI DUCT		sument	Page 10 of 68	0/10 13.	JJ.UJ I	JUSU	iviairi
Fill	in this inform	nation to identify	your case and th							
Deb	otor 1	Candace Nic	ole Kizzie							
		First Name		e Name		Last Name				
	otor 2									
	ouse, if filing)	First Name		e Name		Last Name				
Unit	ted States Bar	nkruptcy Court for	the: EASTERN	DISTRI	CT OF VIRG	INIA				
Cas	se number _					_			_	heck if this is an mended filing
SC n ea hink nfor	chedule ich category, se cit fits best. Be	e as complete and a space is needed, a	roperty escribe items. List	le. If two	married peopl	an asset fits in more than on le are filing together, both are ne top of any additional page	equally resp	onsible for su	pplying	correct
Part	t 1: Describe I	Each Residence, Bu				wn or Have an Interest In				
1.1		the property?  Crescent Stree f available, or other des			Single-family	t <b>y?</b> Check all that apply home Ilti-unit building	the amoun	of any secure	d claims	xemptions. Put on <i>Schedule D:</i>
					Condominium	n or cooperative	Creditors V	Vho Have Clair	ns Secur	ed by Property.
	Henrico	VA	23231-0000		Land	d or mobile home	Current va			nt value of the
	City	State	ZIP Code			roporty	entire prop	75,000.00	portio	n you own? \$175.000.00
	Oity	Olate	Zii Gode			торену				, -,
										ership interest the entireties, or
				Who	has an interes	st in the property? Check one		e), if known.	,,	,
					Debtor 1 only	1	Sole Est	ate		
	Richmond	City			Debtor 2 only	,				
	County				Debtor 1 and	Debtor 2 only	- Check	r if this is com	munity	oronerty
					At least one of	of the debtors and another		Check if this is community property see instructions)		
					r information y erty identificat	ou wish to add about this ite ion number:	m, such as lo	cal		

Official Form 106A/B Schedule A/B: Property page 1

**Primary Residence** 

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 11 of 68

1.2 193 \	u own or have mo Woodstone Casa	ore than one,				
193 \	Woodstone Casa		\//ha4			
	woodstone Casa		vviiai	t is the property? Check all that apply		
Olloot	address, if available, or othe	ar description	□	0 ,		claims or exemptions. Put ured claims on Schedule D:
	audress, ii avallable, or othe	er description		Duplex or multi-unit building		laims Secured by Property.
				Condominium or cooperative		
				Manufactured or mobile home		
				Land	Current value of the entire property?	Current value of the portion you own?
City	St	ate ZIP Cod	=		\$2,000.00	· · · · · · · · · · · · · · · · · · ·
,				Timeshare		
				Other		of your ownership interest enancy by the entireties, or
			Who	has an interest in the property? Check one	a life estate), if know	
				Debtor 1 only	Tenancy in Com	mon
				Debtor 2 only		
County	,			Debtor 1 and Debtor 2 only	- Chack if this is c	ommunity property
				At least one of the debtors and another	(see instructions)	ommunity property
				r information you wish to add about this it	tem, such as local	
			prop	erty identification number:		
			Tim	eshare		
		gal or equitable	interest in a	ny vehicles, whether they are registe	ered or not? Include any	vyahialaa vay awa that
	•	•	·	Schedule G: Executory Contracts and U		verilicies you own that
	lse drives. If you leas	•	·	Schedule G: Executory Contracts and U		venicies you own that
Cars, va	ans, trucks, tractors	•	ehicles, moto	Schedule G: Executory Contracts and U	Inexpired Leases.  Do not deduct secured	d claims or exemptions. Put
Cars, va □ No ■ Yes	e: Jeep	s, sport utility ve	ehicles, moto	Schedule G: Executory Contracts and U prcycles In interest in the property? Check one	Do not deduct secured the amount of any sec	
Cars, va	ans, trucks, tractors  ie: Jeep  Grand Cherc	s, sport utility ve	who has a	Schedule G: Executory Contracts and U  prcycles  In interest in the property? Check one  1 only	Do not deduct secured the amount of any secured Creditors Who Have Comments of the comments of	d claims or exemptions. Put ured claims on <i>Schedule D:</i> Claims Secured by <i>Property</i> .
Cars, va  No Yes  3.1 Mak Mod Year	ans, trucks, tractors  e: Jeep  Grand Cherc	s, sport utility ve	Who has a  Debtor	Schedule G: Executory Contracts and U  prcycles  In interest in the property? Check one  1 only	Do not deduct secured the amount of any sec	d claims or exemptions. Put ured claims on Schedule D:
Cars, va  No Yes  3.1 Mak Mod Year Appr	Ase: Jeep Hel: Grand Cherce 72006	s, sport utility vo	Who has a Debtor Debtor	Schedule G: Executory Contracts and U prcycles In interest in the property? Check one 1 only 2 only	Do not deduct secured the amount of any sec Creditors Who Have C	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the

Current value of the portion you own?
Do not deduct secured claims or exemptions.

		Case 16-33	064-KLP	Doc 1	Filed 06/20/16 Document F	Entered 06/20/16 2 Page 12 of 68 Case numbe	L3:55:03	Desc Main
De	ebtor 1	Candace Nic	ole Kizzie			Case numbe	r (if known)	
6.	Examµ □ No	hold goods and foles: Major applian		linens, china	ı, kitchenware			
	. 00	. 2000					<b>-</b> 1	
			Washer, D Coffee Tak	ryer, Refriç ole, End Ta	gerator, Range, Mic	ns, Small Appliances, rowave, Freezer, Sofa, mps, Desk & Desk Chairs, acuum.		\$2,500.00
	□ No	oles: Televisions a including cell			reo, and digital equipme layers, games	ent; computers, printers, scanne	rs; music colle	ctions; electronic devices
	■ Yes	. Describe			Monitor, Laptop, P		7	\$1,500.00
			Phones, G	aming Dev	rices, Televisions, B	iu-ray Piayer.		Ψ1,300.00
3.			figurines; pair ons, memorab			, pictures, or other art objects; s	tamp, coin, or	baseball card collections;
	_	. Describe						
9.	Exam <sub>l</sub>	nent for sports a ples: Sports, photo musical instru	graphic, exerc	ise, and othe	er hobby equipment; bic	ycles, pool tables, golf clubs, ski	s; canoes and	kayaks; carpentry tools;
	■ No □ Yes	. Describe						
10.	Firear Exan		s, shotguns, ar	mmunition, ar	nd related equipment			
	☐ Yes	. Describe						
11.	□ No		othes, furs, lea	ther coats, d	esigner wear, shoes, ac	ccessories		
			Clothing					\$100.00
12.	■ No		welry, costume	e jewelry, eng	gagement rings, weddin	g rings, heirloom jewelry, watche	es, gems, gold	, silver
13.		arm animals nples: Dogs, cats,	birds, horses					
		. Describe						
14.	Any o	other personal an	d household	items you di	id not already list, incl	uding any health aids you did	not list	
	☐ Yes	. Give specific inf	ormation					
15			•		Part 3, including any	entries for pages you have att	ached	\$4,100.00

Document Page 13 of 68 , Case number *(if known)* Debtor 1 **Candace Nicole Kizzie** Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... \$264.00 Wells Fargo 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☐ No Yes. Give specific information about them..... Name of entity: % of ownership: **Ingenious Visions LLC** 100 % Unknown 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Nο Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

■ No

■ No

☐ Yes.....

		Case 16-33064-KLP	Doc 1		Entered 06/20/16 13:55	:03 Desc Main
D	ebtor 1	Candace Nicole Kizzie		Document P	age 14 of 68 Case number (if know	vn)
	☐ Yes	s. Give specific information abou	ut them			
26	_Exan	nts, copyrights, trademarks, tr nples: Internet domain names, w				
	■ No □ Yes	s. Give specific information about	ut them			
27	Exan ■ No	uses, franchises, and other genuples: Building permits, exclusives. Give specific information about	e licenses, co		oldings, liquor licenses, professional lice	enses
M	oney o	r property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax ro ■ No	efunds owed to you				
	_	s. Give specific information abou	it them, includ	ding whether you already	y filed the returns and the tax years	
29	Exan ■ No	ly support  nples: Past due or lump sum alir  s. Give specific information	mony, spousa	al support, child support,	maintenance, divorce settlement, prope	erty settlement
30	Exan	r amounts someone owes you nples: Unpaid wages, disability i benefits; unpaid loans yo s. Give specific information	nsurance pay		s, sick pay, vacation pay, workers' com	pensation, Social Security
31		ests in insurance policies nples: Health, disability, or life in	surance; hea	olth savings account (HS	A); credit, homeowner's, or renter's insu	ırance
		s. Name the insurance company Compar	of each polic ny name:	ey and list its value.	Beneficiary:	Surrender or refund value:
32	If you some	nterest in property that is due u are the beneficiary of a living to cone has died.  S. Give specific information			ance policy, or are currently entitled to r	eceive property because
33		ns against third parties, wheth nples: Accidents, employment d			r made a demand for payment sue	
	_	s. Describe each claim				
34	□ No		claims of ev	ery nature, including c	ounterclaims of the debtor and rights	s to set off claims
	■ Yes	s. Describe each claim				
			petition		of filing of bankruptcy property settlement,	\$1.00
35	. Any f	inancial assets you did not al	ready list			

Official Form 106A/B Schedule A/B: Property page 5

 $\hfill \square$  Yes. Give specific information..

56. <b>Part</b> :	2: Total vehicles, line 5		\$9.250.00		
55. <b>Part</b>	1: Total real estate, line 2				\$177,000.00
Part 8:	List the Totals of Each Part of this Form				
54. <b>Add</b> 1	the dollar value of all of your entries fro	m Part 7. Write that	number here		\$0.00
☐ Yes.	Give specific information				
■ No					
	have other property of any kind you doles: Season tickets, country club member				
Part 7:	Describe All Property You Own or Have ar	ı Interest in That You D	id Not List Above		
☐ Yes	. Go to line 47.				
■ No.	Go to Part 7.				
6. <b>Do yo</b> ı	ı own or have any legal or equitable int	erest in any farm- or	commercial fishing-r	elated property?	
	scribe Any Farm- and Commercial Fishing-R ou own or have an interest in farmland, list it in		wn or Have an Interest In	ı.	
☐ Yes. 0	Go to line 38.				
No. Go	to Part 6.				
7. Do you	own or have any legal or equitable interest ir	n any business-related	property?		
Part 5: De	scribe Any Business-Related Property You C	Own or Have an Interes	t In. List any real estate i	in Part 1.	
	the dollar value of all of your entries fro art 4. Write that number here				\$265.00
Debtor 1	Candace Nicole Kizzie	Document	Page 15 of 68	} Case number <i>(if known)</i>	

55.	Part 1: Total real estate, line 2				\$177,000.00
56.	Part 2: Total vehicles, line 5		\$9,250.00		
57.	Part 3: Total personal and household items, line 15		\$4,100.00		
58.	Part 4: Total financial assets, line 36		\$265.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$13,615.00	Copy personal property total	\$13,615.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$190,615.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Candace Nicole I	<b>Cizzie</b>		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number				
(if known)				Check if this is
				amended filing

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
4740 Erin Crescent Street Henrico, VA 23231 Richmond City County	\$175,000.00		\$4,034.00	Va. Code Ann. § 34-4
Primary Residence Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
193 Woodstone Casa Timeshare	\$2,000.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit	
2006 Jeep Grand Cherokee 100,000 miles	\$9,250.00		\$1.00	Va. Code Ann. § 34-26(8)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2006 Jeep Grand Cherokee 100,000 miles	\$9,250.00	•	\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 17 of 68

Case Nicole Kizzie

Case number (if known)

Calidace Nicole Rizzle				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Kitchen Utensils, Decorative Items, Linens, Small Appliances, Washer,	\$2,500.00		\$2,500.00	Va. Code Ann. § 34-26(4a)
Dryer, Refrigerator, Range, Microwave, Freezer, Sofa, Coffee Table, End Tables, Armchairs, Lamps, Desk & Desk Chairs, Dining Table & Chairs, Bedroom Sets, Vacuum. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Desktop Computer & Monitor, Laptop, Printers, Tablet, Cell Phones,	\$1,500.00		\$1,500.00	Va. Code Ann. § 34-26(4a)
Gaming Devices, Televisions, Blu-ray Player. Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$100.00		\$100.00	Va. Code Ann. § 34-26(4)
Line nom <i>Schedule Arb</i> . 1111			100% of fair market value, up to any applicable statutory limit	
Checking: Wells Fargo Line from Schedule A/B: 17.1	\$264.00		\$264.00	Va. Code Ann. § 34-4
Zine nom eshedate / v.Z. TTT			100% of fair market value, up to any applicable statutory limit	
Ingenious Visions LLC 100 % ownership	Unknown	-	\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 19.1			100% of fair market value, up to any applicable statutory limit	
Proceeds within six months of filing of bankruptcy	\$1.00		\$1.00	Va. Code Ann. § 34-4
petition from life insurance, property settlement, or any decedent's estate. Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			led on or after the date of adjustmen	nt.)
Yes. Did you acquire the property covered	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
□ No □ Yes				

			Document	Page 1	18 of 68	_	
Fill i	n this informa	ation to identify you	r case:				
Debt	tor 1	Candace Nicole	Kizzio				
DCDI	101 1	First Name	Middle Name	Last Name			
Debt	tor 2						
(Spou	ise if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Banl	kruptcy Court for the:	EASTERN DISTRICT OF VIR	GINIA			
Omic	ca Otates Barn	Mapley Court for the.	ZAGIZIAN DIGITAGI GI VIII				
Case	e number						
(if kno	own)					☐ Check	if this is an
						ameno	led filing
Oπ:	-:-! <b>-</b>	40CD					
Omi	cial Form	106D					
Scl	hedule [	D: Creditors	Who Have Claims	Secure	ed by Property	y	12/15
s nee numb 1. Do	eded, copy the A er (if known). any creditors h	Additional Page, fill it on a secured by	f two married people are filing toget but, number the entries, and attach in your property? his form to the court with your othe	t to this form.	On the top of any addition	nal pages, write your na	
	_		·	ii scriedules.	Tou have nothing else to	o report on this form.	
	Yes. Fill in a	all of the information b	pelow.				
Part	1: List All	Secured Claims					
for ea	ach claim. If mo	re than one creditor has	nore than one secured claim, list the cr a particular claim, list the other credito al order according to the creditor's nar	ors in Part 2. As		Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	American Credit				£40.004.00	<b>*</b> 0.050.00	£4 074 00
2.1	Acceptance		Describe the property that secures		\$10,321.00	\$9,250.00	\$1,071.00
	Creditor's Name		2006 Jeep Grand Cherokee	100,000			
	OC4 E Mair	a Ctract 2md	miles				
	Floor	n Street, 2nd	As of the date you file, the claim is	: Check all that	I		
		rg, SC 29302	apply.				
			Contingent				
	Number, Street, C	City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who	owes the deb	ot? Check one.	Nature of lien. Check all that apply.	-			
■ D	ebtor 1 only		■ An agreement you made (such as		socurad		
	ebtor 2 only		car loan)	s mortgage or s	secureu		
_	ebtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, me	achanic's lian)			
		e debtors and another	☐ Judgment lien from a lawsuit	echanic s lienj			
	heck if this clai		Other (including a right to offset)	PMSI			
	community deb		— Other (including a right to onset)				
Date	debt was incur	rred <u>9/4/2015</u>	Last 4 digits of account num	mber XXXX	<u> </u>		
2.2	Massanutte	en Resort	Describe the property that secures	the claim:	\$2,300.00	\$2,000.00	\$300.00
	Creditor's Name		193 Woodstone Casa				
			Timeshare				
	PO Box 12	27	As of the data way file the plains in				
	Harrisonbu		As of the date you file, the claim is apply.	: Check all that			
	22803-1227	7	☐ Contingent				
	Number, Street, C	City, State & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who	owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
	ebtor 1 only		An agreement you made (such as	s mortgage or s	secured		
_	ebtor 2 only		car loan)				
_	ebtor 1 and Deb	•	☐ Statutory lien (such as tax lien, m	echanic's lien)			
		e debtors and another	☐ Judgment lien from a lawsuit				
	heck if this clai		Other (including a right to offset)	First Dee	ed of Trust		
Date	debt was incur	rred	Last 4 digits of account nun	nber			

Official Form 106D

# Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 19 of 68

Debt	for 1 Candace Nicole Kizzie		Case number (if know)		
	First Name Middle N	ame Last Name			
2.3	VA Housing Development	Describe the property that secures the claim:	\$169,396.00	\$175,000.00	\$0.00
	Creditor's Name	4740 Erin Crescent Street Henrico, VA 23231 Richmond City County Primary Residence			
	P.O. Box 4549 Richmond, VA 23220	As of the date you file, the claim is: Check all that apply.  Contingent	-		
Who	Number, Street, City, State & Zip Code  owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.			
_	ebtor 1 only ebtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
_	ebtor 1 and Debtor 2 only t least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	heck if this claim relates to a community debt	Other (including a right to offset)  Deed of	Trust		
Date	debt was incurred 02/2013	Last 4 digits of account number XXX	<u>x</u>		
لہ ۵	d the deller volue of vour ortice in 5	Column A on this name. Write that number have	¢192.047	00	
If th		column A on this page. Write that number here: the dollar value totals from all pages.	\$182,017. \$182,017.		

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 10 00004 REI	Documer Documer	nt Page 20 of 68	0 10.00.00	7000 Main
Fill in this	s information to identify your case:				
Debtor 1	Candace Nicole Kizzie	9			
DODIO! !	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fil	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the: EA	STERN DISTRICT OF	VIRGINIA		
Case num	nber				
(if known)					heck if this is an
				a	mended filing
Official	Form 106E/F				
	ule E/F: Creditors Who	Have Unsecu	red Claims		12/15
			RIORITY claims and Part 2 for creditors w	ith MONDDIODITY alsi	
eft. Attach		ou have no information	ace is needed, copy the Part you need, fil to report in a Part, do not file that Part. (		
	y creditors have priority unsecured clai				
	. Go to Part 2.	inis against you:			
☐ Yes	s. List All of Your NONPRIORITY Un	secured Claims			
	y creditors have nonpriority unsecured	• •			
⊔ No.	. You have nothing to report in this part. So	ubmit this form to the cou	rt with your other schedules.		
■ Yes	S.				
unsecu	ured claim, list the creditor separately for e ne creditor holds a particular claim, list the	each claim. For each clain	er of the creditor who holds each claim. If n listed, identify what type of claim it is. Do n If you have more than three nonpriority unse	ot list claims already inc	luded in Part 1. If more
					Total claim
4.1 <b>A</b>	ES/Bank of America	Last 4 digits	of account number XXXX		\$1.00
	onpriority Creditor's Name O Box 1047	When was the	e debt incurred?		
<del>-</del>	arrisburg, PA 17106	When was the			-
N	umber Street City State Zlp Code	As of the date	e you file, the claim is: Check all that apply	/	
W	ho incurred the debt? Check one.				
	Debtor 1 only	☐ Contingen	t		
	Debtor 2 only	☐ Unliquidate	∍d		
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another		PRIORITY unsecured claim:		
	Check if this claim is for a community				
	ebt the claim subject to offset?	Obligations report as prior	s arising out of a separation agreement or d	ivorce that you did not	
	No		ny claims ension or profit-sharing plans, and other sim	nilar debts	
	• No ] <sub>Yes</sub>		ecify Student Loan - Notice Only		
	<b>-</b> 1€5	()ther Sne	CITY Student Loan - Notice Only	Ψ 12,100.00	

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 21 of 68

Debtor 1 Candace Nicole Kizzie Case number (if know) 4.2 **AES/JP MorganChase** \$1.00 Last 4 digits of account number XXXX Nonpriority Creditor's Name PO Box 61047 When was the debt incurred? Harrisburg, PA 17106 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Student Loan - Notice Only - \$ 9,729.00 ☐ Yes 4.3 **Allied Cash Advance** \$600.00 Last 4 digits of account number **XXXX** Nonpriority Creditor's Name Re: Bankruptcy When was the debt incurred? 4380 South Laburnum Avenue Richmond, VA 23231 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Balance Due** Other. Specify \$691.00 4.4 AT&T Mobility Last 4 digits of account number XXXX Nonpriority Creditor's Name P.O. Box 536216 When was the debt incurred? Atlanta, GA 30353-6216 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Account Balance

Document Page 22 of 68 Debtor 1 Candace Nicole Kizzie Case number (if know) 4.5 \$30.00 **Atlantic Credit & Finance** Last 4 digits of account number XXXX Nonpriority Creditor's Name Re: Bankruptcy When was the debt incurred? P.O. Box 13386 Roanoke, VA 24033-3386 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Account Balance ☐ Yes Capital One Bank USA NA \$2,347.00 4.6 Last 4 digits of account number Multiple Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? **Multiple Dates** Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Account Balance ☐ Yes **Cash Advance Center** 4.7 \$350.00 Last 4 digits of account number XXX Nonpriority Creditor's Name PO Box 28324 When was the debt incurred? Henrico, VA 23228-0324 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

Official Form 106 E/F

■ No

☐ Yes

report as priority claims

■ Other. Specify Pay Day Loan

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 23 of 68

Debtor 1 Candace Nicole Kizzie Case number (if know) 4.8 \$289.00 City of Richmond - Utilities Last 4 digits of account number XXXX Nonpriority Creditor's Name 730 E. Broad Street, Rm 102 When was the debt incurred? Richmond, VA 23219 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Utilities ☐ Yes 4.9 Comcast Last 4 digits of account number **XXXX** \$999.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept When was the debt incurred? PO Box 3012 Southeastern, PA 19398-3012 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Account Balance ☐ Yes 4.1 Continental Central Credit, In \$500.00 XXXX Last 4 digits of account number 0 Nonpriority Creditor's Name 5611 Palmer Way, Suite G When was the debt incurred? Carlsbad, CA 92010 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection Agency

Document Page 24 of 68 Debtor 1 Candace Nicole Kizzie Case number (if know) 4.1 **Credit One Bank** \$795.00 **XXXX** Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 98873 When was the debt incurred? Las Vegas, NV 89193-8873 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Account Balance ☐ Yes 4.1 **Dept Of Ed/Nelnet** \$1.00 **XXXX** Last 4 digits of account number Nonpriority Creditor's Name 121 S 13Th Street When was the debt incurred? Lincoln, NE 68508 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Student Loan - Notice Only - \$ 5,606.00 ☐ Yes 4.1 **Express Scripts** \$50.00 Last 4 digits of account number XXXX Nonpriority Creditor's Name PO BOX 665564 When was the debt incurred? Saint Louis, MO 63166-6564 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify Account Balance

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Document Page 25 of 68 Case number (if know) Debtor 1 Candace Nicole Kizzie 4.1 **Ford Motor Credit Company** \$8,612.00 **XXXX** Last 4 digits of account number 4 Nonpriority Creditor's Name **National Bankruptcy Service** When was the debt incurred? 9930 Federal Drive Colorado Springs, CO 80921-3664 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Vehicle Deficiency ☐ Yes 4.1 **GEICO** \$0.00 **XXXX** Last 4 digits of account number Nonpriority Creditor's Name One GEICO Blvd. When was the debt incurred? Fredericksburg, VA 22412-0001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Balance Due ☐ Yes 4.1 Jefferson Capital Systems **XXXX** \$536.00 6 Last 4 digits of account number Nonpriority Creditor's Name 16 McLeland Road When was the debt incurred? Saint Cloud, MN 56303 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

Official Form 106 E/F

debt

■ No

☐ Yes

report as priority claims

■ Other. Specify Account Balance

 $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 26 of 68 Debtor 1 Candace Nicole Kizzie Case number (if know) 4.1 \$190.00 Labcorp **XXXX** Last 4 digits of account number Nonpriority Creditor's Name Re: Bankruptcy Dept. When was the debt incurred? PO Box 2240 **Burlington, NC 27216** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical Services 4.1 Midland Funding LLC \$1,289.00 **XXXX** Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? Assigne of Synchrony Bank PO Box 2121 Warren, MI 48090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Account Balance ☐ Yes 4.1 **National Vision** \$30.00 XXXX Last 4 digits of account number 9 Nonpriority Creditor's Name **RE: Bankruptcy** When was the debt incurred? 296 Grayson Highway Lawrenceville, GA 30045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

■ Other. Specify Account Balance

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Page 27 of 68
Case number (if know) Debtor 1 Candace Nicole Kizzie 4.2 Nelnet Loan Services, Inc. \$1.00 **XXXX** Last 4 digits of account number 0 Nonpriority Creditor's Name Re: Bankruptcy When was the debt incurred? P.O. Box 17460 Denver, CO 80217-0460 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Student Loan - Notice Only - \$ 14,479.00 4.2 **Onemain Financial** \$7,469.00 **XXXX** Last 4 digits of account number Nonpriority Creditor's Name 6801 Colwell Blvd When was the debt incurred? Attn C/S Care Dept Irving, TX 75039 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Account Balance ☐ Yes 4.2 St. Mary's Hospital \$370.00 XXXX Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept When was the debt incurred? P.O. Box 100767 Atlanta, GA 30384-0767 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Account Balance

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 28 of 68

Case number (if know) Debtor 1 Candace Nicole Kizzie 4.2 SYNCB/Care Credit \$454.00 **XXXX** Last 4 digits of account number 3 Nonpriority Creditor's Name C/O PO Box 965036 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt lacksquare Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Account Balance ☐ Yes 4.2 Transworld Systems, Inc. \$636.00 Last 4 digits of account number **XXXX** Nonpriority Creditor's Name **Collection Agency** When was the debt incurred? 500 Montgomery St., Suite 400 Alexandria, VA 22314-1560 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Account Balance ☐ Yes 4.2 Verizon Wireless **XXXX** \$897.00 5 Last 4 digits of account number Nonpriority Creditor's Name PO Box 26055 When was the debt incurred? Minneapolis, MN 55426 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Account Balance ☐ Yes

Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Case 16-33064-KLP

Page 29 of 68
Case number (if know) Document Debtor 1 Candace Nicole Kizzie

4.2 Virginia Emergency Physician	Last 4 digits of account numb	per XXXX	\$363.00
Nonpriority Creditor's Name PO Box 17643	When was the debt incurred?		
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsect	ured claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a s	separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	·	aring plans, and other similar debts	
Yes	Other. Specify Account	Balance	
Part 3: List Others to Be Notified About a D	ebt That You Already Listed		
is trying to collect from you for a debt you owe to s	someone else, list the original credito nat you listed in Parts 1 or 2, list the a	at you already listed in Parts 1 or 2. For example, if a or in Parts 1 or 2, then list the collection agency here. additional creditors here. If you do not have additional	Similarly, if you
Name and Address	On which entry in Part 1 or Part 2 did	·	
American Agencies	Line 4.13 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
2491 Paxton Street National Recovery Agency		Part 2: Creditors with Nonpriority Unsecured Claims	
Harrisburg, PA 17111	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Credit Collection Services Re:	Line <b>4.15</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims	
725 Canton St		Part 2: Creditors with Nonpriority Unsecured Claims	
Norwood, MA 02062			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Diversified Consultants, Inc.	Line 4.25 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 1117 Charlotte, NC 28201-1117		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	vou list the original creditor?	
LCA Collections	Line <b>4.17</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims	
Re: LabCorp		■ Part 2: Creditors with Nonpriority Unsecured Claims	
1250 Chapel Hill Road Burlington, NC 27215			
g.c,c	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Randolph, Boyd, Cherry, Vaughn	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Re: 13 East Main Street		Part 2: Creditors with Nonpriority Unsecured Claims	
Richmond, VA 23219			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Reiss F. Wilks, Esq.	Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
6802 Paragon Place Suite 410 Richmond, VA 23230		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
The Law Office of John P. Frye	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 13665		■ Part 2: Creditors with Nonpriority Unsecured Claims	

Official Form 106 E/F

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Page 30 of 68 Case number (if know) Document

Debtor 1 Candace Nicole Kizzie

Roanoke, VA 24036

Last 4 digits of account number

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	27,501.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	27,501.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Candace Nicole I	<b>Cizzie</b>		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				Check if this is an
				amended filing

# Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				<del>_</del>
	Name				
	Number	Street			=
	City		State	ZIP Code	_
2.2	Oity		Otate	Zii Oodo	
2.2					_
	Name				
		<u> </u>			_
	Number	Street			
					_
	City		State	ZIP Code	
2.3					
	Name				<del>_</del>
	Name				
	Number	Street			<del>-</del>
	City		State	ZIP Code	_
	City		State	ZIF Code	
2.4					<u> </u>
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Name				
	Number	Street			_
		211001			
	City		Ctoto	ZID Code	_
	City		State	ZIP Code	

		Documer	nt Page 32 of	<u>68</u>
Fill in th	is information to identify your	case:		
Debtor 1	Candace Nicole I	Cizzio		
Debior 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if,	filing) First Name	Middle Name	Last Name	
United S	tates Bankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA	
Case nul	mber			Charlettite to a
(II KIIOWII)				☐ Check if this is an amended filing
				amended ming
Officia	al Form 106H			
	dule H: Your Cod	obtore		42/45
Sche	dule H. Your Cou	epror2		12/15
1. Do	rithin the last 8 years, have you ona, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spoulumn 1, list all of your codebine 2 again as a codebtor only in 106D), Schedule E/F (Officia Column 2.	you are filing a joint case, do  I lived in a community pro Nevada, New Mexico, Puer  use, or legal equivalent live vers. Do not include your s f that person is a guaranto I Form 106E/F), or Schedul	perty state or territory? rto Rico, Texas, Washing with you at the time? pouse as a codebtor if or or cosigner. Make su	? (Community property states and territories include gton, and Wisconsin.)  if your spouse is filling with you. List the person shown are you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fill  Column 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedules that apply:
3.1	Kendra Singleton 4740 Erin Crescent Street Henrico, VA 23231			■ Schedule D, line □ Schedule E/F, line □ Schedule G Massanutten Resort
3.2	Kendra Singleton 4740 Erin Crescent St. Henrico, VA 23231			☐ Schedule D, line  ■ Schedule E/F, line4.18 ☐ Schedule G Midland Funding LLC

# Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 33 of 68

Fill	in this information to identify your c	ase:								
Del	otor 1 Candace Ni	cole Kizzie			_					
	otor 2				_					
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF VIRGINIA							
Cas	se number					Check	c if this is:			
(If kr	lown)		-			☐ Ar	n amende	d filing		
									postpetition c lowing date:	hapter
0	fficial Form 106I					MI	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	ır spouse is not filing w	ith you, do not includ	de inforn	natio	on about	your spo	use. If mor	e space is ne	eded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fili	ng spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	oyed		
	attach a separate page with information about additional		□ Not employed				☐ Not er	mployed		
	employers.	Occupation	Web Analyst							
	Include part-time, seasonal, or self-employed work.	Employer's name	Bon Secours He	alth Sy	stei	m				
	Occupation may include student or homemaker, if it applies.	Employer's address	1505 Marriottsvi Marriottsville, M							
		How long employed t	here? Since 6	/2/2014			_			_
Par	Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for a	any I	ine, write	\$0 in the	space. Incli	ude your non-	filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all e	mplo	oyers for t	hat perso	n on the line	es below. If yo	ou need
						For Deb	tor 1	For Debt	tor 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	6,	189.50	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	

6,189.50

N/A

Calculate gross Income. Add line 2 + line 3.

# Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 34 of 68

Deb	otor 1	Candace Nicole Kizzie	_	C	Case nu	mber (if known)					
	Con	y line 4 here	4.		For D	ebtor 1 6,189.50			Debtor filing s	2 or pouse N/A	
_			4.		Ψ	0,109.50	_	Ψ		IN/A	_
5.		all payroll deductions:	_		•			•			
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	1,013.03		\$		N/A	_
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b 5c		\$	0.00 0.00	_	\$ 		N/A N/A	_
	5d.	Required repayments of retirement fund loans	5c		\$	0.00	_	\$—		N/A N/A	_
	5e.	Insurance	5e		\$	462.95	_	\$		N/A	_
	5f.	Domestic support obligations	5f		\$	0.00	_	\$		N/A	_
	5g.	Union dues	50	g.	\$	0.00	_	\$		N/A	_
	5h.	Other deductions. Specify: Imputed Life	5h	า.+	\$	1.50	) -	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,477.48	3	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,712.02	<u>.</u>	\$		N/A	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	а.	\$	0.00	)	\$		N/A	
	8b.	Interest and dividends	8b	Ο.	\$	0.00	)	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	<b>t</b> 80	•	\$	0.00	)	\$		N/A	
	8d.	Unemployment compensation	80		\$	0.00	_	\$		N/A	_
	8e.	Social Security	86		\$	0.00	_	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f		\$	0.00	_	\$		N/A	_
	8g.	Pension or retirement income	8g	g.	\$	0.00	_	\$		N/A	_
	8h.	Federal and State Tax Refunds	O!	Դ.+	\$	119.00		+ \$		N/A	_
	OII.	Other monthly income. Specify: Amortized	_ 01	ı.∓ ⊢	Ψ	113.00	_ ·	ΓΨ <u></u>		13/7	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	119.00	)	\$		N/A	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	4,	831.02 +	B _		N/A	= \$ _	4,831.02
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	r depe						chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies							12.	\$	4,831.02
13.	Do :	you expect an increase or decrease within the year after you file this form	1?							Combi month	ned ly income
		No. Yes Explain:									

Fill	in this informa	ation to identify yo	our case:					
	otor 1	Candace Nic		e		Check	c if this is:	
Deb	otor 2			-		_	An amended filing	uing postpotition chapter
	ouse, if filing)							ving postpetition chapter the following date:
Unit	ed States Bankı	ruptcy Court for the	: EASTE	RN DISTRICT OF VIRGIN	IIA	N	MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J						
		J: Your						12/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par 1.	t 1: Desci	ribe Your House	hold					
	■ No. Go to		in a senar	ata housahold?				
	□N	lo		al Form 106J-2, <i>Expenses</i>	s for Separate House	hold of Debto	or 2.	
2.		e dependents?	□ No	_, _, μ			<del>-</del> -	
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Nephew		8	■ Yes □ No
					Girlfriend		28	■ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	expenses o	penses include f people other t d your depende	han $_{f \Box}$	No Yes				
Est exp	imate your ex	a date after the l	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the	lude expense value of suc ficial Form 10	h assistance an	non-cash d have ind	government assistance i luded it on <i>Schedule I:</i> )	f you know our Income		Your exp	enses
4.		or home owners		ses for your residence. I	nclude first mortgage	4. \$		962.00
	If not include	ded in line 4:						_
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$	-	0.00
				ıpkeep expenses		4c. \$		0.00
_		owner's associat				4d. \$		15.00
5.	Additional i	πortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

# Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 36 of 68

Debtor 1 C	andace Nicole Kizzie	Case num	ber (if known)	
. Utilities	:			
	lectricity, heat, natural gas	6a.	\$	215.00
	/ater, sewer, garbage collection	6b.	·	70.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	·	460.00
	other. Specify: Security System	6d.	·	70.00
			·	
	nd housekeeping supplies	7.	·	600.00
	re and children's education costs	8.	\$	0.00
	g, laundry, and dry cleaning	9.	\$	150.00
	al care products and services	10.	\$	50.00
1. Medical	l and dental expenses	11.	\$	125.00
	ortation. Include gas, maintenance, bus or train fare.	40	•	200.00
	nclude car payments.	12.	·	300.00
	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
↓. Charita	ble contributions and religious donations	14.	\$	10.00
5. Insuran				
	nclude insurance deducted from your pay or included in lines 4 or 20.			
15a. Li	ife insurance	15a.	\$	0.00
15b. H	ealth insurance	15b.	\$	0.00
15c. V	ehicle insurance	15c.	\$	90.00
	ther insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		•	0.00
	Personal Property	16.	\$	15.00
	nent or lease payments:		*	10.00
	ar payments for Vehicle 1	17a.	\$	0.00
	ar payments for Vehicle 2	17a.	·	0.00
	• •	17b. 17c.	·	
	ther. Specify: Student Loan		·	375.00
	ther. Specify:	17d.	\$	0.00
	syments of alimony, maintenance, and support that you did not report as	i 18.	\$	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	·	
_	ayments you make to support others who do not live with you.	40	\$	0.00
Specify:		19.		
	eal property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	lortgages on other property	20a.	·	0.00
	eal estate taxes	20b.	·	0.00
	roperty, homeowner's, or renter's insurance	20c.		0.00
20d. M	laintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. H	omeowner's association or condominium dues	20e.	\$	0.00
1. Other: S	Specify: Miscellaneous Expenses	21.	+\$	134.00
	· · -			
	te your monthly expenses			
	d lines 4 through 21.		\$	3,791.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add	d line 22a and 22b. The result is your monthly expenses.		\$	3,791.00
	, , ,		· -	5,151100
	te your monthly net income.			
23a. C	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,831.02
23b. C	opy your monthly expenses from line 22c above.	23b.	-\$	3,791.00
23c. S	ubtract your monthly expenses from your monthly income.			4 2 4 2 2 2
	he result is your monthly net income.	23c.	\$	1,040.02
For exam modificat	expect an increase or decrease in your expenses within the year after you ple, do you expect to finish paying for your car loan within the year or do you expect you ion to the terms of your mortgage?			or decrease because of a
■ No.				
<b>—</b> NO.				

## Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 37 of 68

Fill in this infor	mation to identify your	case:				
Debtor 1	Candace Nicole k	(izzie				
	First Name	Middle Name	La	st Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	La	st Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT	OF VIRGINIA	A .		
Case number						
(if known)						<ul><li>Check if this is an amended filing</li></ul>
You must file thi obtaining mone		le bankruptcy schedulen connection with a ba	es or amend	ed schedules. Mal	king a false state	ement, concealing property, or 00, or imprisonment for up to 20
Sig	n Below					
Did you pa	ay or agree to pay some	one who is NOT an atte	orney to help	you fill out bankr	ruptcy forms?	
■ No						
☐ Yes. I	Name of person					kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare te true and correct.	that I have read the su	mmary and s	schedules filed wit	th this declaration	on and
X /s/ Car	ndace Nicole Kizzie		х			
	ice Nicole Kizzie			Signature of Debt	tor 2	
Signatu	re of Debtor 1					
Date _	June 20, 2016			Date		

## Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 38 of 68

Fill	in this inform	nation to identify you	r case:			
Deb	otor 1	Candace Nicole	Kizzie			
D . I		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
	se number own)					Check if this is an
Sta Be a	s complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write you	
			nrital Status and Where You	ı Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married ■ Not marr	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
<b>3.</b> state					ity property state or territor co, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Par	t 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$31,423.60	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Case 16-33064-KLP Page 39 of 68 Case number (if known) Document

Debtor 1 Candace Nicole Kizzie

				<b>5</b> 17 4					51/ 6		
				Debtor 1			_		Debtor 2		
				Sources of Check all tha		(befor	s income re deductions an sions)	nd	Sources of inco		Gross income (before deductions and exclusions)
	or last calen anuary 1 to		31, 2015 )	■ Wages, of bonuses, tip	commissions, s		\$67,625.0	00	☐ Wages, comr bonuses, tips	missions,	
				☐ Operating	g a business				☐ Operating a b	ousiness	
	or the calend anuary 1 to			■ Wages, o	commissions, s		\$51,781.0	00	☐ Wages, comr bonuses, tips	missions,	
				☐ Operating	g a business				Operating a b	ousiness	
	Include include and other winnings.  List each s	come regard public benef If you are fili	less of wheth it payments; ng a joint cas he gross inco	ner that income pensions; rent se and you hav	e is taxable. Exa al income; inter re income that y	amples o rest; divid you recei	dends; money co ved together, list	re alir ollecte t it on		royalties; and btor 1.	ecurity, unemployment, d gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe bel		each (befor	s income from source re deductions an sions)	nd	Sources of inco Describe below.		Gross income (before deductions and exclusions)
	or the calend anuary 1 to			Unemploy	ment		\$1,134.0	00			
Pa 6.	Are either □ No.	Debtor 1's Neither Deindividual p During the No. Yes  * Subject to	or Debtor 2' ebtor 1 nor Derimarily for a 90 days befor Go to line 7 List below e paid that crunot include to adjustment	's debts prim Debtor 2 has p personal, fam ore you filed fo '. each creditor to editor. Do not payments to a t on 4/01/19 an or both have p	nily, or househout bankruptcy, die bankruptcy,	r debts? umer del d purpos d you pa id a total tts for do his bankr s after th umer dek	ots. Consumer of se."  y any creditor and of \$6,425* or more mestic support of uptcy case, at for cases filed ots.	total of tot	of \$6,425* or more	e? ments and th ild support an	(8) as "incurred by an le total amount you and alimony. Also, do
		■ No.	Go to line 7	,							
		□ Yes	include pay		estic support o				he total amount y ort and alimony. A		creditor. Do not nclude payments to an
	Creditor'	s Name and	I Address	C	ates of payme	ent	Total amount		Amount you still owe	Was this p	ayment for

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Page 40 of 68 Document Case number (if known) Debtor 1 Candace Nicole Kizzie Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Amount you **Insider's Name and Address** Dates of payment **Total amount** Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Ford Motor Credit Company, LLC. Warrant in Debt **Prince George General** □ Pending v. Candace Nicole Kizzie **District Court** □ On appeal □ Concluded Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ■ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property **Explain** what happened **Ford Motor Credit Company** 2012 Ford Focus 9/2015 \$8,900.00 **National Bankruptcy Service** 9930 Federal Drive Property was repossessed. Colorado Springs, CO 80921-3664 ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details.

Official Form 107

Describe the action the creditor took

Amount

**Creditor Name and Address** 

Date action was

taken

Page 41 of 68 Case number (if known) Debtor 1 Candace Nicole Kizzie 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You \$500.00 **Boleman Law Firm Legal Fees** 2104 Laburnum Avenue Ste 201 Richmond, VA 23230-1588 **Boleman Law Firm Bankruptcy Filing Fee** \$310.00 2104 Laburnum Avenue Ste 201 Richmond, VA 23230-1588

Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main

Case 16-33064-KLP

Doc 1

Document

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 42 of 68 Case number (if known)

Debtor 1 Candace Nicole Kizzie

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and vateransferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
	Boleman Law Firm 2104 Laburnum Avenue Ste 201 Richmond, VA 23230-1588	Credit Counselii	ng			\$25.00
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you list.	or to make payments			or transfer any proper	ty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and va transferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
40	Million Comment of the state of	did and to do a		•		46
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already lie	iness or financial affa as security (such as the	irs? ne granting of a s			
	■ No					
	☐ Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			any property or s received or debts xchange	Date transfer was made
	r erson's relationship to you					
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No		y property to a s	self-settled ti	rust or similar device o	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and va	alue of the prop	erty transfer	red	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred?	•				
	Include checking, savings, money market, or o houses, pension funds, cooperatives, associated No	tions, and other finan	its; certificates cial institutions	of deposit; s s.	nares in banks, credit	unions, brokerage
	Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of accou instrument	cl m	ate account was osed, sold, loved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, an	y safe depos	it box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had according Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?
		,				

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 43 of 68 Case number (if known) Debtor 1 Candace Nicole Kizzie

22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy?	•
	■ No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for	,		
23.	 Do you hold or control any property that some	one else owns? Include any proper	rty you horrowed from are storing for	or hold in trust
20.	for someone.	one else owns: melade any proper	ty you borrowed from, are storing for	, or more in trust
	■ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Inform	nation		
For	he purpose of Part 10, the following definitions	s apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, ground	— ·	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	s defined under any environmental	law, whether you now own, operate, o	or utilize it or use
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardous	s waste, hazardous substance, toxic s	ubstance,
Ren	ort all notices, releases, and proceedings that y		n they occurred	
		·	•	
24.	Has any governmental unit notified you that yo	ou may be hable or potentially hable	e under or in violation of an environme	entai iaw ?
	No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	y release of hazardous material?		
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin	istrative proceeding under any envi	ironmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Co	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to any	business?
	☐ A sole proprietor or self-employed in a	•		
	A member of a limited liability company	y (LLC) or limited liability partnersh	ip (LLP)	
Offici		of Financial Affairs for Individuals Filing		page

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 44 of 68 Case number (if known)

Debtor 1 Candace Nicole Kizzie

28.

	☐ A partner in a partnership					
☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation				
	No. None of the above applies. Go to F	Part 12.				
	Yes. Check all that apply above and fill	in the details below for each business.				
Ad	siness Name Idress mber, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Do not in	Identification number clude Social Security number or ITIN.		
47	genious Visions LLC 40 erin Crescent Street enrico, VA 23231	Web Graphic Design	EIN: From-To	27-3448913 2009		
	hin 2 years before you filed for bankrupt titutions, creditors, or other parties.	cy, did you give a financial statement to an	yone abou	t your business? Include all financial		
	No Yes. Fill in the details below.					
Ad	me  dress  mber, Street, City, State and ZIP Code)	Date Issued				

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 45 of 68 Case number (if known)

Part 12: Sign Below	
are true and correct. I understand that making a fa	ancial Affairs and any attachments, and I declare under penalty of perjury that the answers alse statement, concealing property, or obtaining money or property by fraud in connection 250,000, or imprisonment for up to 20 years, or both.
/s/ Candace Nicole Kizzie Candace Nicole Kizzie	Signature of Debtor 2
Signature of Debtor 1	digitature of Debtor 2
Date June 20, 2016	Date
Did you attach additional pages to Your Statemen	nt of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
□Yes	
Did you pay or agree to pay someone who is not a	an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person Attach the Bankrup	tcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main

## Document Page 46 of 68 United States Bankruptcy Court

		_			_			1-	_	- J	_	_
]	Ea	ste	ern	Di	ist	rict	of	Vi	r	gin	ia	

In re	Candace Nicole Kizzie	Case No.		
		Debtor(s)	Chapter	13

	IN A CHAPTER 13 CASE		
	(for use in the Richmond Divisio	on only)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I an compensation paid to me, for services rendered or to be rendered on behalf of the bankruptcy case is as follows:		
	For legal services, I have agreed to accept	\$	5,100.00
	Prior to the filing of this statement I have received		500.00
	Balance Due	\$	4,600.00
2.	The source of the compensation paid to me was:		
	■ Debtor $\square$ Other (specify)		
3.	The source of compensation to be paid to me is:		
	■ Debtor $\square$ Other (specify)		
4.	■ I have not agreed to share the above-disclosed compensation with any other person	unless they are m	nembers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in the		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspec Bankruptcy Rule $2016-1(C)(3)$ .	ts of the bankrupt	cy case, as required by Local
6.	I am electing to request compensation and reimbursement of expenses in this case:		
	a. ■ In accordance with the "no-look" fee set forth in Local Bankruptcy Rule 2016	5-1(C)(1)(a) and (	C)(3)(a).
	b. $\square$ By submitting applications for compensation in the manner set forth in Local	Bankruptcy Rule	2016-1(C)(1)(c)(ii).
	An attorney for the debtor that fails to make the election to request compensation p (C)(3)(a) at the commencement of the case will be deemed to have elected to reque Bankruptcy Rule 2016-1(C)(1)(c)(ii).		

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 47 of 68 CERTIFICATION

I certify that the foregoing is an accurate statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

June 20, 2016	/s/ Patrick Thomas Keith VSB
Date	Patrick Thomas Keith VSB 48446 Signature of Attorney
	Boleman Law Firm, P.C.

Name of Law Firm
P.O. Box 11588
Richmond, VA 23230
(804) 358-9900 Fax: (804) 358-8704

# NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

### PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

June 20, 2016/s/ Patrick Thomas Keith VSBDatePatrick Thomas Keith VSB 48446Signature of Attorney

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 48 of 68

Fill in this inform	Fill in this information to identify your case:					
Debtor 1	Candace Nicole Kizz	ie				
Debtor 2 (Spouse, if filing)						
United States B	ankruptcy Court for the:	Eastern District of Virginia				
Case number (if known)						

Check	Check as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

## Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

P	art	1: Calculate Your Average Monthly Income	·					
		What is your marital and filing status? Check one of	onlv.					
		■ Not married. Fill out Column A, lines 2-11.	- ,					
		☐ Married. Fill out both Columns A and B, lines 2-11						
	10 th	Il in the average monthly income that you received from a 1(10A). For example, if you are filing on September 15, the 6-6 6 months, add the income for all 6 months and divide the tot ouses own the same rental property, put the income from that	month per al by 6. Fi	riod would Il in the re	be March 1 throusult. Do not includ	ugh August 31. If the a de any income amoun	amount of your monthly income t more than once. For examp	e varied during le, if both
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissi	ons (before all	\$ 6,229.01	\$	
	3.	<b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.	le payme	ents from	a spouse if	\$	<b>O</b> \$	
	4.	All amounts from any source which are regularly polyou or your dependents, including child support from an unmarried partner, members of your househout and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	<b>rt.</b> Includ old, your o spouse o	e regula: depende	r contributions nts, parents,	\$0.00	<b>)</b> \$	
	5.	Net income from operating a business, profession, or farm	Debtor	1				
		Gross receipts (before all deductions)	\$_	0.00				
		Ordinary and necessary operating expenses	-\$ _	0.00				
		Net monthly income from a business, profession, or fa	arm \$	0.00	Copy here ->	\$ 0.00	<u> </u>	
	6.	Net income from rental and other real property	Debtor					
		Gross receipts (before all deductions)	\$_	0.00				
		Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00				
		Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$ 0.00	) \$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 49 of 68

Case number (if known)

Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ For your spouse\_\_\_\_ 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 6,229.01 6.229.01 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income **Determine How to Measure Your Deductions from Income** Part 2: 12. Copy your total average monthly income from line 11. 6,229.01 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 6,229.01 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 6,229.01 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 74,748.12 15b. The result is your current monthly income for the year for this part of the form.

**Candace Nicole Kizzie** 

Debtor 1

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 50 of 68

Debt	or 1	Candace	Nicole Kizzie			Case number (if known)			
16	. Cal	culate the n	nedian family income that applies to	<b>you.</b> Follo	ow these steps	:			
	16a	. Fill in the s	tate in which you live.	\	/A				
	16b	. Fill in the n	number of people in your household.		2				
			nedian family income for your state and	size of ho				\$	69,277.00
		To find a li	st of applicable median income amounts s for this form. This list may also be ava	s, go onlir	ne using the lir			Ψ	
17		_	es compare?	o			,,		
	17a	11 _	e 15b is less than or equal to line 16c. ( U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N	NOT fill ou	ut Calculation	of Your Disposable Income (	Official Form 12	22C-2)	
	17b	132	e 15b is more than line 16c. On the top 25(b)(3). <b>Go to Part 3 and fill out Calc</b> ur current monthly income from line 14 a	ulation o					
Par	t 3:	Calculat	e Your Commitment Period Under 11	U.S.C. §	1325(b)(4)				
18.	Cop	y your tota	I average monthly income from line 1	11			\$_		6,229.01
19.	cont	tend that cal	rital adjustment if it applies. If you are loulating the commitment period under 1 e, copy the amount from line 13.	e married, 11 U.S.C.	your spouse i § 1325(b)(4) a	s not filing with you, and you allows you to deduct part of y	ı /our		
	19a	. If the marit	al adjustment does not apply, fill in 0 on	iline 19a.			<b>-</b> \$_		0.00
	19b	. Subtract li	ine 19a from line 18.					\$	6,229.01
20.	Calc	culate your	current monthly income for the year.	. Follow t	hese steps:				
	20a	. Copy line 1	19b					\$	6,229.01
		Multiply by	12 (the number of months in a year).					х	12
	20b	. The result	is your current monthly income for the y	ear for th	is part of the f	orm		\$	74,748.12
	20c.	. Copy the n	nedian family income for your state and	size of ho	ousehold from	line 16c		\$	69,277.00
	21	How do th	ne lines compare?						
	۷۱.		•						
			20b is less than line 20c. Unless otherwides 3 years. Go to Part 4.	ise ordere	ed by the cour	, on the top of page 1 of this	form, check bo	x 3, 11	ne commitment
			20b is more than or equal to line 20c. Ur nitment period is 5 years. Go to Part 4.	nless othe	erwise ordered	by the court, on the top of p	age 1 of this for	m, che	eck box 4, The
Par	t 4:	Sign Bel	low						
	By s	signing here	, under penalty of perjury I declare that	the inform	nation on this	statement and in any attachn	nents is true and	d corre	ect.
)	<b>(</b> /s/	Candace	Nicole Kizzie						
			cole Kizzie		_				
	•	gnature of D  June 20							
	Dale	MM / DD							
	If yo	ou checked 1	17a, do NOT fill out or file Form 122C-2.						
	If yo	u checked 1	17b, fill out Form 122C-2 and file it with	this form.	On line 39 of	that form, copy your current	monthly income	from	line 14 above.

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 51 of 68

				•		
Fill in	this information to i	dentify your case:				
Debto	r 1 Candace	Nicole Kizzie				
Debto (Spou	r 2 se, if filing)					
United	States Bankruptcy C	ourt for the: _Eastern Distri	ict of Virginia			
Case (if kno				☐ Check	if this is an amende	d filing
Officia	I Form 122C-2					
Cha	pter 13 Cald	culation of You	r Disposable Ir	ncome		04/16
	out this form, you wi itment Period (Offici		ppy of Chapter 13 Stateme	nt of Your Current Monthly	Income and Calculati	ion of
space	is needed, attach a s		n, Include the line number	ther, both are equally respo to which additional informa		
Part 1	Calculate Your	Deductions from Your Inc	come			
the	questions in lines 6-		ards, go online using the I	r certain expense amounts. ink specified in the separate		
exp	enses if they are high	er than the standards. Do no	ot include any operating exp	nse. In later parts of the form, enses that you subtracted fro income in line 13 of Form 12:	m income in lines 5 an	
lf yo	our expenses differ fro	m month to month, enter the	e average expense.			
Not	e: Line numbers 1-4 a	re not used in this form. The	ese numbers apply to inform	nation required by a similar for	m used in chapter 7 ca	ases.
5.	The number of peo	ple used in determining ye	our deductions from inco	ne		
		people who could be claime ny additional dependents w e in your household.			2	
Nat	ional Standards	You must use the IRS	National Standards to answ	ver the questions in lines 6-7.		
6.		I other items: Using the nur dollar amount for food, cloth		in line 5 and the IRS Nationa	\$	1,083.00
7.	the dollar amount for people who are 65 o	out-of-pocket health care.	The number of people is splote have a higher IRS allowa	tered in line 5 and the IRS Na it into two categoriespeople ance for health car costs. If yo 22.	who are under 65 and	

Official Form 22C-2

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main

Document Page 52 of 68 **Candace Nicole Kizzie** Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 108.00 Copy here=> 108.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 130 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. Total. Add line 7c and line 7f 108.00 108.00 Copy total here=: Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 577.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,117.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **VA Housing Development** 962.00 Сору Repeat this amount 962.00 962.00 9b. Total average monthly payment on line 33a. here=> 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 155.00 155.00 or rent expense). If this number is less than \$0, enter \$0. here=>

Explain why:

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 53 of 68

Debtor 1	Candace Nicole Kizzie		Case number	r (if known)		
11.	Local transportation expenses: Check the number of veh	icles for which you claim	n an ownersl	hip or operating	j expense.	
	☐ 0. Go to line 14.					
	■ 1. Go to line 12.					
	☐ 2 or more. Go to line 12.					
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standard operating expenses, fill in the <i>Operating Costs</i> that apply for					220.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.					
Vel	hicle 1 Describe Vehicle 1: 2006 Jeep Grand Cher	okee 100,000 miles				
13a.	Ownership or leasing costs using IRS Local Standard		\$	471.00		
13b.	Average monthly payment for all debts secured by Vehicle 1	1.				
	Do not include costs for leased vehicles.	•				
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mor bankruptcy. Then divide by 60.		at			
	Name of each creditor for Vehicle 1	Average monthly payment				
	American Credit Acceptance	\$ 192.41				
	Total Average Monthly Payment	\$192.41	Copy here =>	-\$192	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$6	0, enter \$0	\$	278.59	Copy net Vehicle 1 expense here => \$	278.59
Vel	hicle 2 Describe Vehicle 2:					
13d.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	2. Do not include costs fo	or			
	Name of each creditor for Vehicle 2	Average monthly payment				
		\$				
	Total average monthly payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$6	0, enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of				n the \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in a not claim more than the IRS Local Standard for <i>Public Trans</i>	what you believe is the a				0.00

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 54 of 68

Debtor 1 Candace Nicole Kizzie Case number (if known)

Otti	er Necessary Expenses	In addition to the expense the following IRS categor		s listed above	, you are allowed your monthly expenses	s for	
16.	self-employment taxes, so	cial security taxes, and Me lowever, if you expect to re rom the total monthly amou	edicare taxes eceive a tax	s. You may ind refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from lust divide the expected refund by 12 for taxes.	\$	894.03
17.	Involuntary deductions:		eductions th	nat your job re	quires, such as retirement		
	contributions, union dues, and uniform costs.  Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.					\$	0.00
18.	filing together, include pay	ments that you make for yo or life insurance on your de	our spouse's	s term life insu	e insurance. If two married people are irance. I spouse's life insurance, or for any form	\$	2.00
19.	Court-ordered payments administrative agency, suc Do not include payments of	h as spousal or child supp	ort payment	ts.	by the order of a court or  You will list these obligations in line 35.	\$	0.00
20.	Education: The total mont	thly amount that you pay fo					
	as a condition for your j		ant abild if v	مريام مالمريم	otion is available for similar convices	\$	0.00
21.	, , , ,	, , ,		·	ation is available for similar services. sitting, daycare, nursery, and preschool.	Ψ	
	Do not include payments for			•	nung, dayoaro, naroory, and proconcon	\$	0.00
22.		Ith and welfare of you or you.  It. Include only the amount	our depende t that is mor	ents and that is e than the tota		\$	0.00
23.	for you and your depender phone service, to the exter income, if it is not reimburs Do not include payments for	nts, such as pagers, call want necessary for your health sed by your employer. or basic home telephone, in	aiting, caller h and welfar nternet and	identification, re or that of you	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment ount you previously deducted.	+\$	0.00
24.	Add all of the expenses and lines 6 through 23.	allowed under the IRS ex	pense allo	wances.		\$	3,317.62
Add	litional Expense Deduction	ns These are additiona Note: Do not include					
25.					s listed in lines 0-24.		
				ccount expen	uses. The monthly expenses for health ly necessary for yourself, your spouse, o	or	
	insurance, disability insura			ccount expen	ses. The monthly expenses for health	or	
	insurance, disability insura your dependents.		ccounts that	ccount expen are reasonab	ses. The monthly expenses for health	or	
	insurance, disability insura your dependents. Health insurance		s	are reasonab	ses. The monthly expenses for health	or	
	insurance, disability insura your dependents. Health insurance Disability insurance		\$ \$	are reasonab 462.95 0.00	ses. The monthly expenses for health	or \$	462.95
	insurance, disability insuraryour dependents.  Health insurance Disability insurance Health savings account  Total  Do you actually spend this	nce, and health savings ac	\$ \$ + \$	ccount expen are reasonab 462.95 0.00	ises. The monthly expenses for health ly necessary for yourself, your spouse, o		462.95
	insurance, disability insuraryour dependents.  Health insurance Disability insurance Health savings account  Total  Do you actually spend this	nce, and health savings ac	\$ \$ + \$	ccount expen are reasonab 462.95 0.00	ises. The monthly expenses for health ly necessary for yourself, your spouse, o		462.95
26.	insurance, disability insurary your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this  No. How much do you have yes  Continued contributions continue to pay for the reas	total amount? you actually spend?  to the care of household sonable and necessary car of your immediate family	to family re and supp	462.95 0.00 0.00 462.95	copy total here=>  e actual monthly expenses that you will rely, chronically ill, or disabled member of uch expenses. These expenses may	\$	462.95
	insurance, disability insuraryour dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this  No. How much do your actually spend this yes  Continued contributions continue to pay for the reasyour household or member include contributions to an  Protection against family	total amount? you actually spend?  to the care of household sonable and necessary car of your immediate family account of a qualified ABL violence. The reasonably	*  *  # \$  for family reand supp who is unable. E program.  recessary	462.95 0.00 0.00 462.95 members. The ort of an elder ole to pay for s 26 U.S.C. § 5 monthly expe	copy total here=>  e actual monthly expenses that you will rely, chronically ill, or disabled member of uch expenses. These expenses may	\$	

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 55 of 68

	Candace Nicole Kizzie	Case number (if known)		
	Additional home energy costs. Your hom ine 8.	e energy costs are included in your insurance and operating expenses on		
	If you believe that you have home energy on the fill in the excess amount of home er	osts that are more than the home energy costs included in expenses on linergy costs	е	
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that the additional ary.	\$_	0.00
;	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.			
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.		
,	Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or after the date of adjustment.	\$_	0.00
I	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.			
		ional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.		
,	You must show that the additional amount of	claimed is reasonable and necessary.	\$_	0.00
	Continuing charitable contributions. The nstruments to a religious or charitable orga	e amount that you will continue to contribute in the form of cash or financial inization. 11 U.S.C. § 548(d)(3) and (4).		
ı	Do not include any amount more than 15%	of your gross monthly income.	\$_	10.00
	Add all of the additional expense deductions. Add lines 25 through 31.			
Dedu	ctions for Debt Payment			
33. F	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home mortgages, vehicle		
		33a through 33e.		
		ent, add all amounts that are contractually due to each secured		
	o calculate the total average monthly paym	ent, add all amounts that are contractually due to each secured		ge monthly
CI	o calculate the total average monthly paym reditor in the 60 months after you file for ba Mortgages on your home	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	paym	ent
CI	o calculate the total average monthly paym reditor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.		
сг 33a.	o calculate the total average monthly paym reditor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	paym	962.00
cr 33a. 33b.	o calculate the total average monthly paym reditor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	paym	962.00 192.41
33a. 33b. 33c.	co calculate the total average monthly paym reditor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	paym	962.00
33a. 33b. 33c. 33d.	o calculate the total average monthly paym reditor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	paym	962.00 192.41
33a. 33b. 33c. 33d.	co calculate the total average monthly paymeditor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?	paym	962.00 192.41
33a. 33b. 33c. 33d.	co calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?  No	\$\$	962.00 192.41
33a. 33b. 33c. 33d.	co calculate the total average monthly paymeditor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?  No  Yes	paym	962.00 192.41
33a. 33b. 33c. 33d.	co calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?  No	\$\$	962.00 192.41
33a. 33b. 33c. 33d.	co calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?  No Yes	\$\$	962.00 192.41
33a. 33b. 33c. 33d.	co calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?  No Yes  No Yes	\$\$ \$	962.00 192.41
33a. 33b. 33c. 33d.	co calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?  No Yes  No Yes	\$ \$ \$	962.00 192.41
33a. 33b. 33c. 33d.	co calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?  No Yes  No Yes	\$\$ \$	962.00 192.41

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 56 of 68

ebtor 1	Can	dace Nicole Kizzle			Cas	e num	ber ( <i>if known</i> )			
		debts that you listed in lin property necessary for yo				<b>)</b> ,				
	☐ No.	Go to line 35.								
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill i	ssession of your property							
Nam	ne of the	creditor	Identify property that se	cures the deb	t	Tota	Il cure amount		onthly o	cure
VA	Housi	ng Development	4740 Erin Crescent 23231 Richmond ( Primary Residence	City County		_	13,000.00	÷ 60 = \$ ÷ 60 = \$		216.67
					\$			$\div 60 = \$$		
					Total	\$	216.67	Copy total here=>	. \$	216.67
	No.	due as of the filing date of Go to line 36. Fill in the total amount of a ongoing priority claims, su	II of these priority claims.	Do not includ						
		Total amount of all past-o		ine 19.		\$	0.00	÷ 60	\$	0.00
36. <b>P</b>	roiecte	d monthly Chapter 13 plan				* — \$	1,040.00	-	Ψ	0.00
	•	multiplier for your district as		v the Adminis	trative	* —	1,040.00	_		
C tł T	Office of ne Exec o find a l	the United States Courts (for utive Office for United State ist of district multipliers that inclu- nstructions for this form. This lis	or districts in Alabama and s Trustees (for all other di udes your district, go online u	Y North Caroli istricts). sing the link sp	na) or by ecified in the	x _	7.00			
А	verage	monthly administrative expe	ense			\$	72.80	Copy tota here=>		72.80
		of the deductions for debes 33e through 36.	t payment.						\$	1,443.88
Total	l Deduc	tions from Income								
38. <b>A</b>	dd all d	of the allowed deductions.								
	Copy lir	ne 24, All of the expenses a e allowances	llowed under IRS	. \$	3,317.62	<u>!</u>				
	Copy lir	ne 32, All of the additional ea	xpense deductions	\$	542.95	<u>.</u>				
	Copy lir	ne 37, All of the deductions	for debt payment	+\$	1,443.88	<u> </u>				
	Total de	eductions		\$	5.304.45	,	Conv total here=>	_	\$	5.304.45

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 57 of 68

ebtor 1	Candace Nic	ole Kizzie	Case	e numb	per (if known)		
art 2:	Determine Y	our Disposable Income Under 11 U.S.C. § 13	325(b)(2)				
		urrent monthly income from line 14 of Form r Current Monthly Income and Calculation o				\$	6,229.01
<b>ch</b> i dis red	<b>Ildren.</b> The monability payments eived in accorda	ably necessary income you receive for supp thly average of any child support payments, for for a dependent child, reported in Part I of For ance with applicable nonbankruptcy law to the ex- spended for such child.	ster care payments, or m 122C-1, that you	\$	0	.00	
41. <b>Fil</b> l em in 1	41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).			\$	0	.00	
42. <b>To</b>	al of all deduct	tions allowed under 11 U.S.C. § 707(b)(2)(A).	Copy line 38 here=>	\$	5,304	.45	
exp the	penses and you ir expenses. Yo	ecial circumstances. If special circumstances have no reasonable alternative, describe the sumust give your case trustee a detailed explar documentation for the expenses.	pecial circumstances and	d			
Descri	be the special	circumstances	Amount of expe	nse			
			<b>\$</b>				
			\$				
			\$				
		Total	\$	Co <sub>l</sub> her	oy e=> \$	0.00	
44. <b>To</b>	tal adjustments	s. Add lines 40 through 43.	=> [\$	S	5,304.45	Copy here=> -\$	5,304.45
	-	onthly disposable income under § 1325(b)(2	). Subtract line 44 from li	ne 39	Э.	\$	924.56
hav tim you	ange in income re changed or a e your case will u filed your petiti	e or expenses. If the income in Form 122C-1 or every virtually certain to change after the date you be open, fill in the information below. For examon, check 122C-1 in the first column, enter line ill in when the increase occurred, and fill in the	filed your bankruptcy per aple, if the wages reporte 2 in the second column,	tition d inc	and during the reased after		
Form	Line	Reason for change	Date of change		Increase or decrease?	Amount of cha	ange
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	0-2 0-1 0-2 0-1			_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease	\$ \$ \$	
☐ 1220 ☐ 1220					☐ Increase ☐ Decrease	\$	

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 58 of 68

Debtor 1	Candace Nicole Kizzie	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the inform	nation on this statement and in any attachments is true and correct.
X	/s/ Candace Nicole Kizzie	
	Candace Nicole Kizzie Signature of Debtor 1	
Date	June 20, 2016 MM / DD / YYYY	
	וווווו / טט / ווווווווווווווווווווווווו	

Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 59 of 68

Debtor 1 Candace Nicole Kizzie Case number (if known)

### **Current Monthly Income Details for the Debtor**

**Debtor Income Details:** 

Income for the Period 12/01/2015 to 05/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Bon Secours

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$64,442.94 from check dated 11/30/2015. Ending Year-to-Date Income: \$73,250.07 from check dated 12/31/2015.

This Year:

Current Year-to-Date Income: \$28,566.91 from check dated 5/31/2016.

Income for six-month period (Current+(Ending-Starting)): **\$37,374.04**.

Average Monthly Income: **\$6,229.01**.

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee
 \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-33064-KLP Doc 1 Filed 06/20/16 Entered 06/20/16 13:55:03 Desc Main Document Page 64 of 68

### United States Bankruptcy Court Eastern District of Virginia

In re	Candace Nicole Kizz	ie			Case No.			
			Debtor(s)		Chapter	13		
	COVER SHEET FOR LIST OF CREDITORS  I hereby certify under penalty of perjury that the master mailing list of creditors submitted either on computer diskette, by a typed hard copy in scannable format, with Request for Waiver attached, or uploaded by Electronic Case Filing is a true, correct and complete listing to the best of my knowledge.							
	I further acknowledge that (1) the accuracy and completeness in preparing the creditor listing are the shared responsibility of the debtor and the debtor's attorney, (2) the court will rely on the creditor listing for all mailings, and (3) that the various schedules and statements required by the Bankruptcy Rules are not used for mailing purposes.							
	Master mailing list of creditors submitted via:  (a) computer diskette listing a total of creditors; or							
	<ul> <li>(b) scannable hard copy, with Request for Waiver attached, consisting of pages, listing a total of creditors; or</li> <li>(c)X uploaded via Electronic Case Filing a total of39 creditors.</li> </ul>							
Date:	June 20, 2016	/s/ C	andace Nicole I	Kizzie				

[Check if applicable] \_\_\_ Creditor(s) with foreign addresses included on disk/hard copy.

Candace Nicole Kizzie
Signature of Debtor

[diskcs ver. R-05/23/00]

Office of the US Trustee 701 E. Broad Street Room 4304 Richmond, VA 23219

AES/Bank of America PO Box 1047 Harrisburg, PA 17106

AES/JP MorganChase PO Box 61047 Harrisburg, PA 17106

Allied Cash Advance Re: Bankruptcy 4380 South Laburnum Avenue Richmond, VA 23231

American Agencies 2491 Paxton Street National Recovery Agency Harrisburg, PA 17111

American Credit Acceptance 961 E. Main Street, 2nd Floor Spartanburg, SC 29302

AT&T Mobility P.O. Box 536216 Atlanta, GA 30353-6216

Atlantic Credit & Finance Re: Bankruptcy P.O. Box 13386 Roanoke, VA 24033-3386

Capital One Bank USA NA P.O. Box 30281 Salt Lake City, UT 84130

Cash Advance Center PO Box 28324 Henrico, VA 23228-0324 City of Richmond - Utilities 730 E. Broad Street, Rm 102 Richmond, VA 23219

Comcast Attn: Bankruptcy Dept PO Box 3012 Southeastern, PA 19398-3012

Continental Central Credit, In 5611 Palmer Way, Suite G Carlsbad, CA 92010

Credit Collection Services Re: 725 Canton St Norwood, MA 02062

Credit One Bank
P.O. Box 98873
Las Vegas, NV 89193-8873

Dept Of Ed/Nelnet 121 S 13Th Street Lincoln, NE 68508

Diversified Consultants, Inc. P.O. Box 1117 Charlotte, NC 28201-1117

Express Scripts PO BOX 665564 Saint Louis, MO 63166-6564

Ford Motor Credit Company National Bankruptcy Service 9930 Federal Drive Colorado Springs, CO 80921-3664

GEICO One GEICO Blvd. Fredericksburg, VA 22412-0001 Jefferson Capital Systems 16 McLeland Road Saint Cloud, MN 56303

Kendra Singleton 4740 Erin Crescent Street Henrico, VA 23231

Kendra Singleton 4740 Erin Crescent St. Henrico, VA 23231

Labcorp Re: Bankruptcy Dept. PO Box 2240 Burlington, NC 27216

LCA Collections Re: LabCorp 1250 Chapel Hill Road Burlington, NC 27215

Massanutten Resort PO Box 1227 Harrisonburg, VA 22803-1227

Midland Funding LLC Assigne of Synchrony Bank PO Box 2121 Warren, MI 48090

National Vision RE: Bankruptcy 296 Grayson Highway Lawrenceville, GA 30045

Nelnet Loan Services, Inc. Re: Bankruptcy P.O. Box 17460 Denver, CO 80217-0460

Onemain Financial 6801 Colwell Blvd Attn C/S Care Dept Irving, TX 75039

Randolph, Boyd, Cherry, Vaughn Re: 13 East Main Street Richmond, VA 23219

Reiss F. Wilks, Esq. 6802 Paragon Place Suite 410 Richmond, VA 23230

St. Mary's Hospital Attn: Bankruptcy Dept P.O. Box 100767 Atlanta, GA 30384-0767

SYNCB/Care Credit C/O PO Box 965036 Orlando, FL 32896

The Law Office of John P. Frye P.O. Box 13665
Roanoke, VA 24036

Transworld Systems, Inc. Collection Agency 500 Montgomery St., Suite 400 Alexandria, VA 22314-1560

VA Housing Development P.O. Box 4549 Richmond, VA 23220

Verizon Wireless PO Box 26055 Minneapolis, MN 55426

Virginia Emergency Physician PO Box 17643 Baltimore, MD 21297